



TOWN OF TEWKSBURY

BOARD OF HEALTH
@ THE SENIOR CENTER
175 CHANDLER STREET
TEWKSBURY, MASSACHUSETTS 01876

Lou-Ann C. Clement, C.H.O.
Director of Public Health

(978) 640-4470
Fax: (978) 640-4472

PERMIT APPLICATION FOR THE KEEPING OF ANIMAL

Permit Number: _____

Fee: General Animals \$ 45.00

The undersigned hereby applies for a permit in accordance with the provisions of the Statutes relating thereto

Name of Individual Applicant: _____

Company's Name: _____

Address of Applicant: _____

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

Web address: _____

Emergency Contact Information:

Name: _____

Address: _____

Telephone Number: _____ Cell Phone Number: _____

Email Address: _____

The above named applicant was granted a permit to keep animals by the Tewksbury Board of Health at a public hearing(s) on _____.

Restrictions (if applicable):

List the *type and number of animals* that you have at the location where the permit to keep animals was granted (list by category and number i.e. chickens 10):

Signature: _____ Date Signed: _____

OFFICE USE ONLY:

DATE RECEIVED: _____ CHECK NO: _____ AMOUNT RECEIVED: _____

Board of Health Hours: 7:30 AM to 4:30 PM

Director's Office Hours: Monday – Friday 8:00 AM to 9:30 AM and 2:30 PM to 4:30 PM
Sanitarian Office Hours: Monday – Friday 7:30 AM to 9:00 AM and 3:00 to 4:30 PM